

# **PART B - FEE(S) TRANSMITTAL**

01-63-05

*Handwritten mark*

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7590

10/04/2004

Margaret A. Boulware  
Jenkins & Gilchrist  
Ste. 1800  
1100 Louisiana  
Houston, TX 77002



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**December 30, 2004**

(Deposi

*Signature*  
**Jimmy Patterson**

01/05/2005 HLE444 00000011 100447 10600956

01 FC:1504 300.00 OP  
02 FC:2501 15.00 DA 685.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION
10/600,956	06/20/2003	J. Gregory Kinnett	44702-2USD1	6904

TITLE OF INVENTION: MULTI-FUNCTIONAL ORTHOPEDIC SURGICAL INSTRUMENT AND METHOD OF USING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685	\$300	\$985	01/04/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DAVIS, DANIEL J	3731	606-088000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Jenkins & Gilchrist, P.C**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**J. Gregory Kinnett, M.D.**

**New Orleans, LA**

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☒ Individual ☐ Corporation or other private group entity ☐ Gov

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number - **10-0447** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Signature of Connie Pielech*

Date

**12/30/2004**

Typed or printed name

**Connie Pielech**

Registration No.

**46,991**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, prepa submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Comme Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. B Alexandria, Virginia 22313-1450.

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Application No. (if known): 10/600956

Attorney Docket No.: 44702-00002USD1

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Transmittal Letter (2 pages)  
Part B - Transmittal Issue Fee (1 page)  
Check in the Amount of \$985.00  
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Docket No.: 44702-00002USD1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Patent Application of:  
J. G. Kinnett

Application No.: 10/600956

Group Art Unit: 3731

Filed: June 20, 2003

Examiner: D. J. Davis

For: Multi-Functional Orthopedic Surgical Instrument  
and Method of Using Same

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**TRANSMITTAL LETTER**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

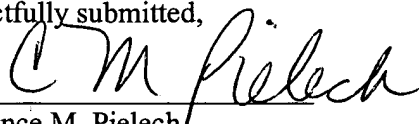
1. Part B – Fee(s) Transmittal
2. Check in the amount of \$985.00
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The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this

application by this firm) to our Deposit Account No. 10-0447, under Order No. 44702-00002USD1.

Dated: December 30, 2004

Respectfully submitted,

By 

Constance M. Pielech

Registration No.: 46,991

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